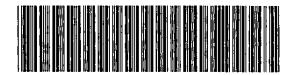
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(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
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Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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SELA ALLON STATE

M. MOON OCT 17 2016

COVER LETTER

TO: Registration S Division of Co					
SUBJECT:	K Circle Far Name of Limite	as LLC ad Liability Company			
The enclosed Articles o	of Organization and fee(s) are so	ubmitted for filing.			
Please return all corresp	pondence concerning this matte	er to the following:			
<i>T</i>	Kriska Kla	U≤ Name of Person			
Oa	k Circle Fac	Firm/Company			
110	17 - La -	Tec			
-// 0	- 1 () de la compaction de la compactin	Address			Z, C
-Wi 	ater Springs Gity Circle Fains E-mail address: (to be used for	State and Zip Code Colonia Color future annual report notifica	708 ation)	6 OCT 17 PM	ECPLICARY OF Y
For further information c	concerning this matter, please ca	all:		<u>ئ</u> ئ	当
S) ris	me of Person Area	27) 907-5 a Code Daytime Telepho	577 ne Number	******	¥ 4
Enclosed is a check for	the following amount:				
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee Certificate of Statu Certified Copy (additional copy is en	ıs &	
New Divis P.O.	ing Address Filing Section sion of Corporations Box 6327 thassee, FL 32314	Street Address New Filing Section Division of Corpora Clifton Building 2661 Executive Cer Tallahassee, FL 323	ater Circle		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Ā	R7	ГIC	LE	I.	N	a me:
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The name of the Limited Liability Company is:

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	<u>Mailing Address</u> :
110 Dandina Ter	110 Nanding Ter
Winter Springs FL	Winter Socious, FL
32708	32708

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Name

JO Danding Ter

Florida street address (P.O. Box NOT acceptable)

A 2 pt 5 270 5

City State Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

001 | 7 PH 4:51

<u> Citle:</u> "AMBR" = Authorized Member	Name and Address:
MGR" = Manager	Kristan Klaus
<i>y</i>	110 Nundina Ter
Am BR	Mitch Xkus
	110 Dunding Ter
Use attachment if necessary)	
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The name and address of each person authorized to manage and control the Limited Liability Company:

ARTICLE IV-